



**CERTIFIED WASTEWATER
CONTRACT OPERATOR
CONSULTING SERVICES**

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WASTEWATER TREATMENT OPERATOR
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FACILITY : **VILLAGE OF ODIN**
DATE : **MARCH 28, 2018**
REPORTING MONTH : **MARCH 2018**

DEAR SIR :

Below is a summary of test results on your wastewater facility. These results should be kept on file at your office. Do not send this sheet to IEPA.

DATE / TIME	SAMPLE POINT	* BOD 5 (PPM)	S. S. (PPM)	p H (UNITS)	NH3-N (PPM)	D. O. (PPM)	Fecal Coli. (N/100ml)
3/19/18@ 930am	INFLUENT	90	120	7.41	—	—	—
“ @ 1045am	EFFLUENT	5.9	2.0	7.62	2.72	(JG)	
							(May-Oct)
Sampled by:							
JG							

If there are any questions, please advise.

(* CBOD 5 if applicable)

(V. Junction City)

Comments:

Robert Risley — Lab Director